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PTO/SB/21 (09-06) Approved for use through 03/31/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

VOS-021 (107070.130 US1)

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Application Number 09/890,335-Conf. #9531 Filing Date TRANSMITTAL July 26, 2001 First Named Inventor **FORM Gregor CEVC** Art Unit 1645 **Examiner Name** 

26

Total Number of Pages in This Submission

B. J. Gangle (to be used for all correspondence after initial filing) Attorney Docket Number

ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Petition x Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Extension of Time Request Terminal Disclaimer Identify below): Return Receipt Postcard Request for Refund Express Abandonment Request 45 references CD, Number of CD(s) x Information Disclosure Statement Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name WILMER CUTLER PICKERING HALE AND DORR LLP Signature Printed name Ann-Louise Kerner, Ph.D. Date Reg. No. October 25, 2006 33.523

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\ <del>\</del> \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	Effective on 12/08/2004. Complete if Known								
A TRADEMARY	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number		09/890,335-Conf. #9531				
MADEN	FEE '	TRANSI	MITTAL		Filing Date		July 26, 2001		
•		For FY 20			First Named Inv		Gregor CEVC	<u> </u>	
•		1011120	05		Examiner Name		B. J. Gangle		
	Applicant cla	ims small entity statu	s. See 37 CFR 1.27	,	Art Unit		1645		
-	TOTAL AMOUNT	OF PAYMENT	<b>(\$)</b> 630.00		Attorney Docket	No.	VOS-021 (10	)7070.130 US1)	
	METHOD OF PA	YMENT (check a	all that apply)						
	Check	Credit Card	Money Order	No	ne Other	(please ider	ntify):		
	x Deposit Accou	nt Deposit Account N	umber: 08-0219 D	eposit Acc	ount Name: Wi	Imer Cutl	er Pickering H	lale and Dor	r LLP
	For the abo	ove-identified depos	sit account, the Di	rector is	hereby authorize	ed to: (che	ck all that apply	')	
	x Charg	ge fee(s) indicated	below		Charg	e fee(s) in	dicated below,	except for the	e filing fee
		ge any additional fe ) under 37 CFR 1.		ment of	x Credit	any overp	payments		
	FEE CALCULAT		10 4.10					-	
	1. BASIC FILING, S		AMINATION FEE	S		_			
		FIL	ING FEES	SE.	ARCH FEES	EXAMII	NATION FEES	3	
:	Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
	Utility	300	150	500	250	200	100		
	Design	200	100	100	50	130	65		
•	Plant	200	100	300	150	160	80		
•	Reissue	300	150	500	250	600	300		
	Provisional	200	100	0	0	0	0		
•	2. EXCESS CLAIM	FEES							mall Entity
	Fee Description							Fee (\$)	Fee (\$)
	Each claim over 20							50	25
	Each independent of		ding Reissues)					200	100
	Multiple dependent		F (A)	F 1	)_:d (#\		Iulainin Donon	360	180
	Total Claims	Extra Claims	Fee (\$)	ree	Paid (\$)		lultiple Depend ee (\$)	Fee Paid (\$)	
	HP = highest number of	of total claims paid for,				<u></u>	00 (4)	10010101	
	Indep. Claims	Extra Claims	Fee (\$)	Fee f	Paid (\$)				-
	HP = highest number (	of independent claims p	naid for if greater than	3.	<del></del>				
	3. APPLICATION S		para 101, 11 ground 1110.	•					-
		n and drawings exc	ceed 100 sheets o	f paper	(excluding electr	onically fi	iled sequence o	r computer	
,		37 CFR 1.52(e)), th				for small e	entity) for each	additional 50	
		on thereof. See 35					. F (A)	E D	aid (6)
	<u>Total Sheets</u>	Extra Sheets 100 =	·	ot each a	dditional 50 or fractional (round up to a who			ree P	aid (\$ <u>)</u>
	4. OTHER FEE(S)				(,	,,		Fees P	aid (\$)
	Non-English Specification. \$130 fee (no small entity discount)								
	Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 1252 Extension for response within second month 450.00								
			1252 Extension	tor res	sponse within s	econd mo	onth	450	.00
	SUBMITTED BY				De sistenti N-		-		
	Signature (L	ha-harri	x Celo	4-	Registration No. (Attorney/Agent)	33,523	Telephone	(617) 526	-6000

SUBMITTED BY					
Signature	The-happy !	Registration No. (Attorney/Agent)	33,523	Telephone	(617) 526-6000
Name (Print/Type)	Ann-Louise Kerner, Ph.D.			Date	October 25, 2006

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